

Contractor

Sections I, II, and III of this document are to be completed for each contract. If you have questions related to this form, contact your designated Residential Contract Manager.

Section I Contractor Identifying Information

Contractor Name: _____

Contract Number: _____

Definition of Subcontractor

Subcontractor: A person or entity that delivers part or all of the programmatic services required of the primary Contractor under this contract and is not an employee of the primary Contractor. There is an agreement between the two persons and/or two entities whereby the primary Contractor authorizes the person or entity (Subcontractor) to deliver the service. There does not have to be any payment for services for the relationship to be considered a subcontract. DFPS does not allow Contractors to subcontract for Case Management services. DFPS will not approve the use of any subcontractor for Case Management Services. DFPS retains the right to disapprove of the use of any subcontractor. For purposes of residential Contracts, Subcontractors include the following:

- Therapy (the provision of assistance and guidance in resolving personal, social, or psychological problems and difficulties through a collaborative process that facilitates progress toward mutually determined treatment goals and objectives. Therapy is provided by a trained professional who demonstrates competence in the ability to appropriately use treatment modalities for individuals, families and groups).
- Direct Service Delivery (service providers who have direct access to providing services, supervision or delivery of treatment components as referenced in the Residential Child Care Contract Components of Care; and
- Management Services (peripheral services that do not include core programmatic components but include support of these services. They include, but are not limited to, the provision of quality assurance, performance improvement, oversight, monitoring, service-related policy and procedure development/enhancement, development of corrective action plans, performance evaluation, disaster emergency response plan development.)

Do you utilize the services of subcontractors as defined above?

☐ Yes ☐ No

If yes, complete this form in its entirety.

Section II Pre-Analysis Section

1. Has Form 2033RCC been completed?

☐ Yes ☐ No

If no, explain.

2. **Attach** all procurement and renewal subcontracting policies and procedures (Label as Procurement and Renewal Subcontracting Policies and Procedures)
3. **Attach** a copy of your management services agreement/contracts. (Label as Management Services Contract)

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4. Do you have a case management services agreement/contracts. ☐ Yes ☐ No
5. How often are your subcontracts renewed?

Have your subcontracts been renewed per your policy?

☐ Yes ☐ No (Explain all No answers below)

6. Do you maintain written subcontracts with all individuals or entities that provide services required by the Residential Child-Care Contract?

☐ Yes ☐ No

If no, explain.

7. Confirm that each subcontract includes the following. If any response is "no", explain at the end of #6.

Item	Yes	No
Clearly identified parties to the Contract		
A scope of work for the services including specification of any requirements of the Residential Child-Care Contract that apply		
A designated time frame for when services are to be performed		
The unit and method of payment		
Performance measures specific to the services provided		
Reporting and record retention requirements		
Sanctions or remedies		
Incorporates the Residential Child-Care Contract by reference and binds the subcontractor to all the requirements, terms, and conditions of the Contract, as well as explicitly hold that the Residential Child-Care Contract controls in the event of any conflict with the subcontract		

Requires certifications (refer to Certificate Section of the Residential Child-Care Contract)		
A DFPS "right to audit" clause		
Termination clause		
A place for both the Contractor and Subcontractor to sign and date		

If "No" on any of the above questions, reference the question and explain.

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8. If you have any subcontracts for \$100,000 or more, do you make a good faith effort to subcontract with Historically Underutilized Businesses (HUB)?

☐ Yes ☐ No ☐ N/A

If No or N/A, explain.

9. Monitoring of Subcontracts

- a. Are there procedures in place to monitor or evaluate the services under the Residential Child-Care Contract that are delivered by subcontractors as required by your Residential Child-Care Contract?

☐ Yes ☐ No (Explain all No answers below)

- b. How often are your subcontractors monitored or evaluated for the services they provide?

- c. Have your subcontractors been monitored or evaluated per your policy and procedures?

☐ Yes ☐ No (Explain all No answers below)

☐ **Attach** a copy of subcontracting monitoring or evaluation procedures (Label as Subcontracting Monitoring or Evaluation Procedures)

- d. What actions do you take when subcontractors are not meeting the subcontract terms and conditions?

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Section III Related-Party Transactions

Definition of Related Party

A person or organization related to the contracted provider by blood/marriage, common ownership, or any association that permits either entity to exercise power or influence (control), either directly or indirectly, over the other.

Two or more individuals or organizations are considered to be related parties whenever they are affiliated or associated in a manner that results in some degree of legal control or practical influence of one over the other. This affiliation or association may be based on common ownership, past or present interests in mutual business endeavors, or family ties. If the elements of common ownership or control are not present in both parties (e.g., the Contractor and the supplying person or organization) the entities are deemed not to be related to each other.

Control exists where an individual or organization has power, directly or indirectly, significantly to influence or direct the actions or policies of an organization or institution. The existence of an immediate family relationship will create an irrefutable presumption of relatedness through control or attribution of ownership or equity interests where the significance tests are met.

The following persons are considered immediate family for cost-reporting purposes: (1) husband and wife; (2) natural parent, child, or sibling; (3) adopted child and adoptive parent; (4) stepparent, stepchild, stepsister, and stepbrother; (5) father-in-law, mother-in-law, brother-in-law, sister-in-law, and daughter-in-law; (6) grandparent and grandchild; (7) uncles and aunts by blood or marriage; (8) nephews and nieces by blood or marriage; and (9) first cousins.

Related-Party Transactions include the purchase/lease of facilities, services, equipment, or supplies from the contractor's central office or related organization(s). Allowable expenses (for cost-reporting purposes) in such cases are limited to the lower of the cost to the related organization (excluding markups and profit margins) or the cost to the contractor.

1. Do you have subcontracts with related parties?
☐ Yes ☐ No
2. If yes, are the contracts procured using an arm's-length principle standard?
☐ Yes ☐ No
3. Did you competitively procure following [OMB A-110](#)?
☐ Yes ☐ No

If no, explain.

- ☐ **Attach** a copy of all bids obtained for competitively-procured services (Label as bids)
- ☐ **Attach** a copy of the advertisement used for these services (Label as advertisement)
4. Do you have any employees of your corporation who are also principal stockholders, own 5% or more stock, or have a controlling interest?

☐ Yes ☐ No

If yes, list name(s) and position(s)

The following questions relate to “doing business” with someone. “Doing Business” refers to business activities such as purchasing (e.g., a building, a computer, a vehicle) leasing (e.g., a building, a computer, a vehicle), and/or providing a service (e.g., legal services, accounting services, banking services), even if the purchase/lease/service is provided at no cost to the Contractor.

Are you “doing business” with:

5. Any members of your Board of Directors?

☐ Yes ☐ No

If yes, provide name(s) and position(s).

6. Anyone who is related, by blood or marriage, to a member of your Board of Directors?

☐ Yes ☐ No

If yes, provide name(s) and their relationship(s).

7. Anyone who is a principal stockholder of your organization?

☐ Yes ☐ No

If yes, provide name(s) and the type of related-party transaction(s).

8. Anyone who is related, by blood or marriage, to a principal stockholder?

☐ Yes ☐ No

If yes, provide name(s) and specify related-party transaction(s).

9. Any related party who leases any building or property to your organization (e.g., a member of your Board of Directors, a principal stockholder, a key employee, or anyone related, by blood or marriage, to a principal stockholder, Board of Directors, or key employee)?

☐ Yes ☐ No

If yes, include the name(s) of all related parties, specify relationship(s), and respond to questions below.

- a. If there are items listed above, ***attach*** a copy of the lease for each item (Label as lease)

Form 9025a must also be completed.

☐ Form 9025a is ***attached***

- b. For each building or property leased from a related party as identified in #9 above, indicate what was leased and how long it has been leased.

- c. For each building or property leased from a related party as indicated in #9 above, indicate the historical cost, month and year the property was placed in service by your facility/agency, the lease term (e.g., one year), and the monthly lease amount.

Name and Title of Person Completing Sections I–III:

Date: _____